



MAY 2008

A Management Response to the Most Common Mental Illnesses in the Workplace

On the 6 May 2008 the Risk Management Section of Law Claims, together with the LawCare Counselling Service ran a program through the *beyondblue* National Workpace Program, "From Awareness to Action – responding to the most common mental health problems in the Worplace".

An invitation was extended to practitioners of 5 years or less duration.

The session presented by Mr Adrian Booth, an Accredited Workplace Trainer with *beyondblue*, was highly successful and it is envisaged that further workshops dealing with the issue of depression will be offered to the profession.

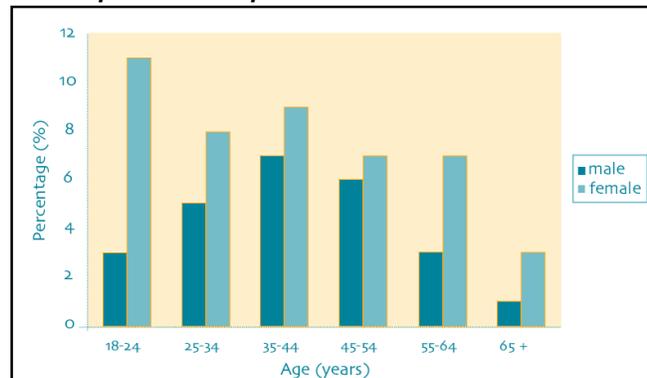
For any queries about this, or other Risk Management Services offered by Law Claims, please contact the Risk Manager, Tracey Nelson on 8410 7677.

Is it our problem? ...managing depression in the legal profession



Depression affects more than 800,000 Australians each year¹, and 1 in 5 persons in their lifetime (that is 1 in 4 women and 1 in 6 men). It will touch everyone either directly or indirectly. Depression reduces a person's ability to function in all aspects of their life, including work, social and home life. As depression imposes huge personal, family and financial costs, it now represents a major social and economic challenge, particularly in today's workplace.

Who experiences depression?



Source: Andrews G, Hall W, Teesson M, Henderson S. *The mental health of Australians*. Mental Health Branch, Commonwealth Department of Health and Aged Care, 1999

Based on data from the National Mental Health Survey², half a million full working days are lost every month and workers cut down their activity on another one million days in one month due to depression. Therefore, the annual cost to the economy is over 6 million full days lost, and over 12 million days of reduced productivity at work each year.

Depression is a medical and social problem that cuts right across barriers of work and recreation. Depression is ranked by the World Health Organisation and the World Bank as the fourth leading cause of death and disability, and is the leading cause of non-fatal disability. By 2020, given the rising rate among young people, the lack of preventative programs and poor access to treatments, it will be second only to cardiovascular disease.

¹ Andrews G, Hall W, Teesson M, Henderson S. *The mental health of Australians*. Mental Health Branch, Commonwealth Department of Health and Aged Care, 1999

² As above

US studies³ have found that of all the professions, lawyers are most prone to depression, anxiety and alcohol problems. A 1990 study at John Hopkins University in the US found that lawyers were nearly four times more likely as other professionals to experience depression.

There are a number of theories to explain why lawyers are most susceptible to stress-related illnesses than other professionals. Most agree that a combination of nature of the job (for example, its requirement for long hours and its culture of success at all costs) and common personality traits in lawyers are at play.

In general, lawyers share two personality traits that may predispose them to depression and other stress-related illnesses: perfectionism and pessimism⁴. The legal profession rewards lawyers' drive to explore and investigate every tiny detail, leaving no loose threads that could be used against them or their clients. However, perfectionism can also set people up to think that whatever they do it not good enough. They tend not to enjoy the achievements. Instead they're focusing on the problems and what they see as the failures.

Pessimism is another trait that has both its positive and negative aspects for lawyers. A US study found that law was the only profession in which pessimists outperform optimists⁵. Combined with a culture of success and the reality of cut-throat competition to get to the top of the ladder, those traits can create a dangerous cocktail for lawyers⁶.

So how can you help someone who may be experiencing depression? *beyondblue* puts this in simple terms, asking "What would you do if that person had a physical illness?" It really shouldn't be any different. It's important to approach the person and engage them, not isolating them further (as social isolation is a common symptom of depression). The most important thing is to take the time to get involved. It can be useful to provide the person with some referral information (either through their organisation's Employee Assistance Program (EAP) or see *beyondblue* contact details at the end of this article).

Many employers realise the importance of staff retention and motivation in creating a harmonious work environment, but in today's climate it is also important to monitor the well being of staff. With the right awareness and support in place to remove the stigma associated with depression, the expense from both a financial and emotional perspective could potentially be avoided.

beyondblue: the national depression initiative is tasked with increasing awareness and removing the stigma associated with depression in the Australian community. *beyondblue* has developed, implemented and evaluated a national program designed to address the issue of depression and other related disorders such as anxiety and substance misuse in workplace settings. The program highlights recognition of some of the common signs of depression in the workplace. More importantly, it demonstrates the types of behaviours that staff and managers may be able to employ to assist their colleagues to deal with their illness. *beyondblue* has delivered this program in hundreds of organisations across Australia, including many large legal firms. For more information about the National Workplace Program contact workplace@beyondblue.org.au or call the National Workplace Program Team on (03) 9810 6100.

A person may be depressed if...

A person may be depressed if, for more than two weeks, they have persistent low mood and loss of interest in usual activities PLUS symptoms in at least 3 of the following categories:

Physical:

Tiredness / fatigue
Appetite / weight change
Disturbed sleep

Headaches
Sick / run down

Thoughts:

Negative thinking patterns
"hopeless, helpless, worthless"
Suicidal thinking

Behaviours:

Social withdrawal / isolation
Unproductive
Alcohol and drug use
Concentration / memory difficulties
Stopping enjoyable activities

Feeling:

Overwhelmed / unhappy
Guilty / indecisive
Disappointed
Lacking in confidence / self-est
Irritability



For more information on these issues please call the *beyondblue* information and referral line 1300 22 4636 (cost of a local call) or go to www.beyondblue.org.au. For free, confidential 24-hour telephone counselling call Lifeline 131 114.

³ Seligman, M. (2002) Authentic Happiness. New York: The Free Press.

⁴ As above

⁵ As above

⁶ Karin Berkley (March 2006). Putting the stress on dealing with depression. Law Institute Journal.